

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H-T	21 413 907	10/23/00
RESPONSE FORMALITY REVIEW	LL		46-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 -+ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
1	7/12/00
2	7/12/00
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If more than 150 claims or 10 actions
staple additional sheet here

LAST AVAILABLE COPY